

Research Article

From Awareness to Self-Diagnosis: The Role of Social Media in Shaping Mental Health Identity among Young People

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Abstract:

Social media has become an important space for young people to seek information, validation, and language for understanding their mental health experiences. TikTok and other short-form video platforms have made terms such as anxiety, ADHD, trauma, burnout, depression, and bipolar increasingly present in everyday conversations. This article aims to analyze the role of social media in shaping young people's mental health identity through the phenomenon of self-diagnosis, while also developing the conceptual awareness-to-self-diagnosis pathway framework. The method used was a narrative literature review with a conceptual approach. The reviewed literature included national and international journal articles, academic books, and reports from health organizations relevant to social media, digital mental health literacy, self-diagnosis, algorithms, and youth identity. The findings show that social media can increase mental health literacy, provide emotional validation, and open conversations about psychological help. However, brief, personal, emotional, and repeated content may also encourage young people to interpret everyday psychological experiences as clinical symptoms. Platform algorithms reinforce this process through exposure to similar content, while digital communities provide social validation that makes psychological labels feel increasingly convincing. This article concludes that self-diagnosis on social media cannot be understood merely as misinformation, but also as a process of meaning-making and identity formation. The implication is that digital mental health literacy needs to help young people distinguish self-reflection, initial screening, personal experience, and professional diagnosis.

Keywords: social media; TikTok; self-diagnosis; digital mental health literacy; mental health identity.

1. Introduction

Today's young people no longer use social media merely for entertainment, but also to find a language through which they can make sense of their psychological unease. On TikTok, Instagram, and other short-form video platforms, terms such as anxiety, ADHD, trauma response, burnout, depression, and bipolar have entered everyday conversations through short videos, background music, emotional captions, and personal testimonies (1),(2). Mental health, which was once discussed more frequently in clinical settings, has now moved into digital spaces as a form of popular knowledge that is rapidly shared and easily identified (3). This shift corresponds with

growing global concern about youth mental health, as well as evidence that social media use is associated with sleep, anxiety, depression, and adolescent development.

This phenomenon cannot be immediately regarded as harmful, as mental health content on social media also has beneficial aspects. For some young people, popular psychological content may serve as an entry point for understanding emotions, recognizing signs of distress, reducing stigma, and feeling less alone (4). Young people who previously lacked the words to describe anxiety, exhaustion, numbness, difficulty concentrating, or loss of motivation may encounter terms that make their experiences feel more intelligible. Within the framework of digital mental health literacy, such exposure may encourage help-seeking, peer discussion, or the awareness that psychological conditions deserve attention.

However, concerns arise when this awareness becomes the basis for independently drawing conclusions about one's clinical condition. Young people may move from "I feel anxious" to "I have an anxiety disorder," from "I have difficulty focusing" to "I have ADHD," or from "I have been hurt" to "I am traumatized." (5),(6) At this point, social media does not merely provide information; it also contributes to shaping how individuals name, understand, and evaluate themselves. This process is important to examine through identity theory, as youth is a period of identity exploration, crisis, and commitment. Recent findings on TikTok, ADHD, and self-diagnosis suggest that short-form formats often simplify symptoms and create a risk of misinterpretation (7).

The role of algorithms further sharpens this issue. Social media does not operate as a neutral space; when users watch, like, save, or share content about ADHD, anxiety, trauma, or depression, recommendation systems may continue to present similar content (8). Such repetition creates a sense of familiarity that gradually becomes convincing. Comments such as "this is exactly me" or "it turns out I am not alone" also provide social validation, meaning that users do not simply receive information but enter a psychological echo chamber that continually reinforces assumptions about themselves (9). In self-categorization theory, identity may be formed through the process of locating oneself within a particular social group. In line with the Proteus effect, digital self-representation may also influence behavior and the way individuals perceive themselves.

Many previous studies have continued to position social media as a risk factor for depression, anxiety, psychological distress, sleep quality, social isolation, social comparison, or addictive behavior. Other studies show that the impact of social media on adolescent mental health is not singular, as it depends on the context of use, individual vulnerability, social relationships, and platform design (10). Nevertheless, discussions of self-diagnosis often stop at the issues of misinformation or misunderstanding symptoms. This article offers novelty by examining self-diagnosis as a process of mental health identity formation shaped by algorithms, emotional validation, digital communities, and the language of popular psychology.

Based on this gap, this article aims to analyze how social media, particularly short-form video platforms such as TikTok, contributes to the formation of mental health identity among young people through the phenomenon of self-diagnosis. This article also explains the benefits and risks of self-diagnosis, develops a conceptual awareness-to-self-diagnosis pathway, and formulates implications for digital mental health literacy, families, educational institutions, health professionals, and social media platforms. This framework maps the pathway from content exposure, symptom recognition, emotional resonance, community validation, and algorithmic reinforcement to the adoption of psychological labels as part of self-identity. Thus, self-diagnosis on social media is not merely the result of limited mental health knowledge, but the outcome of an encounter between suffering that seeks to be named, algorithms that continuously provide validation, and a digital culture that transforms clinical language into the language of identity.

2. Methods

This study employed a narrative literature review method with a conceptual approach. This design was selected because the purpose of the article was not to test statistical relationships between variables, but to develop a theoretical understanding of how social media, particularly TikTok, may influence self-diagnosis and the formation of mental health identity among young people. A narrative literature review is considered appropriate when researchers seek to map the development of ideas, compare findings across fields, and critically construct conceptual arguments. In this article, the literature was not treated as a collection of quotations, but as material for synthesis to explain the pathway from exposure to mental health content, symptom recognition, emotional

resonance, community validation, and algorithmic reinforcement to the use of psychological labels as part of self-identity.

The data sources in this article consisted of secondary literature, including international and national journal articles, academic books, reports from health organizations, and studies on TikTok, social media, mental health literacy, self-diagnosis, health information seeking, and young people's digital identity. The literature search was conducted through Google Scholar, PubMed, ScienceDirect, SpringerLink, Taylor & Francis, MDPI, and Scopus-indexed journals when available. The keywords used included "TikTok mental health," "social media self-diagnosis," "mental health self-diagnosis," "digital mental health literacy," "mental health identity," "ADHD TikTok," "therapy-speak," "algorithmic personalization mental health," and "online health information seeking." This strategy followed the principles of literature review, which require an open, relevant, and traceable search process.

The literature was selected based on several inclusion criteria aligned with the focus of the article. The publications used had to discuss social media, TikTok, or digital platforms; relate to mental health, mental health literacy, stigma, or help-seeking; involve adolescents, university students, emerging adults, or young people; and be relevant to self-diagnosis, the use of psychological labels, or identity formation. Priority was given to academic articles published within the last ten years, with emphasis on studies from the last five years to ensure that the discussion corresponded with the rapidly changing development of social media. Classic books were still used when necessary to strengthen the theoretical foundation of identity. Literature was excluded if it consisted only of popular opinion without an academic basis, lacked clear publication information, or was not directly related to issues of digital mental health.

The analysis was conducted thematically by reading, marking, and grouping the main arguments from the collected literature. The themes examined included social media as a space for mental health literacy, algorithms and content personalization, self-diagnosis and emotional validation, the formation of mental health identity, the benefits and risks of self-diagnosis, and implications for digital mental health promotion. Thematic analysis was used because it enables researchers to identify patterns of meaning, relationships among ideas, and conceptual positions across different sources. The resulting thematic groupings were then synthesized to construct the awareness-to-self-diagnosis pathway. This framework served as the basis for interpreting the review findings and organizing the discussion coherently in accordance with the purpose of the article.

To improve the traceability of the source selection process, this article presents a literature selection flow adapted from PRISMA reporting principles. However, because this article employed a narrative literature review design with a conceptual orientation, the use of this flow was not intended to claim that the study constituted a full systematic review. Rather, it was used to clarify the process of searching, screening, and selecting literature relevant to the focus of the review.

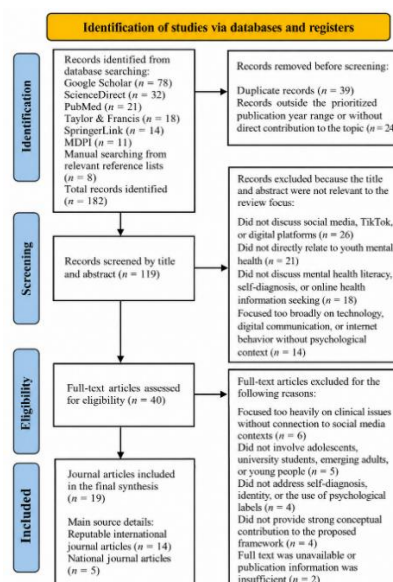


Figure 1. Literature Selection Flow Adapted from PRISMA.

The initial search identified 182 records from Google Scholar, ScienceDirect, PubMed, Taylor & Francis, SpringerLink, MDPI, and manual searching through relevant reference lists. A total of 63 records were removed before screening because they were duplicates, outside the prioritized publication year range, or did not directly contribute to the topic. The remaining 119 records were screened by title and abstract, and 79 records were excluded because they were not relevant to social media, TikTok, youth mental health, mental health literacy, self-diagnosis, or psychological identity. Furthermore, 40 full-text articles were assessed for eligibility, and 21 articles were excluded for conceptual, population-related, or accessibility reasons. Finally, 19 journal articles were included in the final synthesis.

3. Results

The findings of this review are presented as a thematic synthesis of 19 articles discussing the relationship between social media, mental health, digital literacy, self-diagnosis, and the formation of psychological identity among young people. Because this article employed a narrative literature review design, the findings are not presented as new statistical results, but as patterns that emerged from the reviewed literature. The synthesis was conducted by grouping the article focus, main findings, and themes relevant to the awareness-to-self-diagnosis pathway framework. In general, the literature indicates that social media may play a dual role: as a space for education and emotional validation, but also as a space that risks reinforcing symptom simplification, belief in self-diagnosis, and the use of clinical labels as part of self-identity. A summary of the literature synthesis is presented in Table 1.

Table 1. Thematic Synthesis of Reviewed Literature

Theme	Representative Evidence	Main Finding Relevant to This Article	Key References
Social media as a mental health literacy space	Studies on digital health literacy, TikTok-based mental health education, and psychology-related content on social media show that young people increasingly use digital platforms to recognize and understand mental health terms.	Social media provides accessible and emotionally relatable mental health information for young people. Short videos, simple language, and personal stories help users recognize terms such as anxiety, depression, ADHD, trauma, and burnout. However, this form of literacy often remains popular, fragmented, and dependent on the quality of the content consumed.	(11),(12).
Emotional validation through mental health content	Studies on social comparison, feedback-seeking, perceived isolation, and Facebook-related emotional outcomes indicate that social media experiences can shape how young people interpret their emotions and seek recognition from others.	Mental health content may provide emotional validation by making users feel seen, understood, and less alone. This validation can be supportive, especially for young people whose emotional experiences are ignored in offline settings. At the same time, emotionally persuasive content may blur the line between common distress and clinical symptoms.	(13)
Algorithmic reinforcement and repeated exposure	Research on adolescent digital development, umbrella reviews of social media effects, and the quality of TikTok ADHD content suggests that platform design, content repetition, and recommendation systems influence how users encounter mental health information.	Although not all reviewed studies directly measured algorithms, they indicate that platform structure and repeated exposure may shape users' understanding of mental health. On TikTok, repeated exposure to similar mental health content can strengthen subjective symptom recognition and make certain psychological labels feel increasingly familiar and convincing.	(14)
Self-diagnosis as meaning-making	Studies on TikTok-inspired self-diagnosis, adolescent self-diagnosis in the digital era, and mental health literacy among students show that young people often use psychological labels to organize confusing emotional experiences.	Self-diagnosis is not only a result of misinformation or carelessness. It can also function as a meaning-making process, in which young people attempt to name distress, explain personal difficulties, and create a more coherent understanding of themselves before seeking or avoiding professional help.	(15)
Psychological labels as identity	Research on neurodivergent identity performance on TikTok and TikTok-inspired self-diagnosis shows that mental health labels can become part of	Psychological labels such as ADHD, anxiety, trauma, or bipolar may shift from clinical descriptions into identity markers. Young people may move from saying that they experience certain symptoms to	(16)

	how young people present and understand themselves in digital spaces.	identifying themselves through the label itself. This process is central to the proposed awareness-to-self-diagnosis pathway.	
Benefits and risks of self-diagnosis in social media contexts	Systematic reviews, meta-analyses, and empirical studies on problematic social media use show associations between social media use and mental health indicators such as anxiety, depression, distress, poor sleep, addictive behavior, and suicidal ideation.	Social media-based self-diagnosis has a dual effect. It may increase awareness, reduce stigma, and encourage help-seeking, but it may also reinforce inaccurate beliefs, delay professional assessment, increase over-identification with clinical labels, and intensify psychological distress among vulnerable users.	(17)

Social Media as a New Space for Mental Health Literacy

The first finding indicates that social media expands young people's access to mental health information. Through short videos, everyday language, and personal stories, terms such as anxiety, depression, trauma, burnout, ADHD, and mood disorders become easier to recognize without requiring young people to read academic books or immediately consult professionals. Several studies also show that social media can serve as an initial space for young people to understand their psychological experiences, particularly when access to formal services remains limited or is perceived as intimidating. However, the form of literacy that emerges tends to be popular, emotional, and not always comprehensive. Thus, social media accelerates the spread of mental health literacy, but the quality of understanding that develops depends heavily on the accuracy of the content and how users interpret it.

Mental Health Content Provides Emotional Validation

The second finding shows that mental health content often has an impact not only because it contains information, but because it feels close to users' personal experiences. Videos such as "signs you have ADHD," "trauma symptoms that often go unnoticed," or "anxiety symptoms that are often considered normal" can make young people feel understood. This validation is important, especially for those who feel that their anxiety, emptiness, difficulty focusing, or emotional exhaustion is not taken seriously by family, school, or their social environment. The literature on social media and mental health shows that digital experiences may be associated with social comparison, feedback, isolation, and psychological distress. In this synthesis, mental health content provides language and validation, but it may also make common experiences feel like clinical symptoms.

Algorithms Reinforce Exposure to Similar Content

The third finding indicates that algorithmic personalization may reinforce repeated exposure to mental health content. When users watch content until the end, like, save, or share content about ADHD, anxiety, trauma, or depression, platforms may present increasingly similar content. This pattern means that users do not merely encounter information, but become immersed in a stream of content that feels consistent and convincing. Research on TikTok and ADHD shows that disorder-related content can circulate widely even when the quality of information is not always adequate. In this context, algorithms do not provide a formal diagnosis, but they can create a digital experience that makes personal assumptions feel increasingly true. The synthesis suggests that algorithmic reinforcement can transform curiosity into belief, and belief into part of psychological identity.

Self-Diagnosis Emerges as a Response to the Need for Self-Understanding

The fourth finding shows that self-diagnosis does not always emerge from carelessness or merely following a trend. In many cases, young people engage in self-diagnosis because they want to understand suffering that has not yet been named. Psychological labels can provide a sense of relief because experiences that previously felt chaotic, confusing, or difficult to explain become more structured. Studies on mental health literacy and self-diagnosis among university students and Generation Z show that the search for labels is often related to the need to understand one's condition through digital information. Findings on TikTok also indicate that popular psychological content can influence how young people recognize symptoms and evaluate themselves. Thus, self-diagnosis appears to function as a form of meaning-making, rather than merely as a misreading of content.

Psychological Labels May Become Part of Self-Identity

The fifth finding indicates that labels such as anxiety, ADHD, trauma, bipolar, or depression may shift from clinical terms into part of self-identity. This shift is evident when young people no longer simply say "I experience

symptoms,” but begin to understand themselves as “a person with a particular condition.” Research on neurodivergent identity performance on TikTok shows that the platform can become a space for displaying, reinforcing, and gaining social recognition for particular psychological identities. Other findings on digital self-diagnosis also show that the use of mental illness labels can become a way for young people to understand pressure, adaptation, and their psychological experiences. In this synthesis, the subtlest risk of self-diagnosis emerges when clinical labels become the primary center through which individuals understand themselves.

Table 2. Benefits and Risks of Mental Health Self-Diagnosis on Social Media

Aspect	Potential Benefits	Potential Risks
Literacy	Increases awareness of mental health	Information may be superficial, incomplete, or inaccurate
Emotion	Provides validation and a sense of not being alone	Reinforces belief without professional assessment
Identity	Helps young people understand their own experiences	Clinical labels may become rigid identities
Social	Encourages open conversations about mental health	Creates an echo chamber or psychological echo chamber
Professional help	May serve as an initial pathway to help-seeking	May delay consultation because users feel they already know their diagnosis

After these benefits and risks were presented, the synthesis was then organized into the conceptual model of the awareness-to-self-diagnosis pathway. This model illustrates that self-diagnosis on social media does not emerge suddenly, but through a gradual process. This process begins with exposure to mental health content, subjective symptom recognition, emotional resonance, digital community validation, and algorithmic reinforcement. At the next stage, users may adopt psychological labels and make them part of their mental health identity. This pathway may lead to two possible outcomes: encouraging professional help-seeking or reinforcing over-identification with a particular label. This sequence is presented in Figure 2.

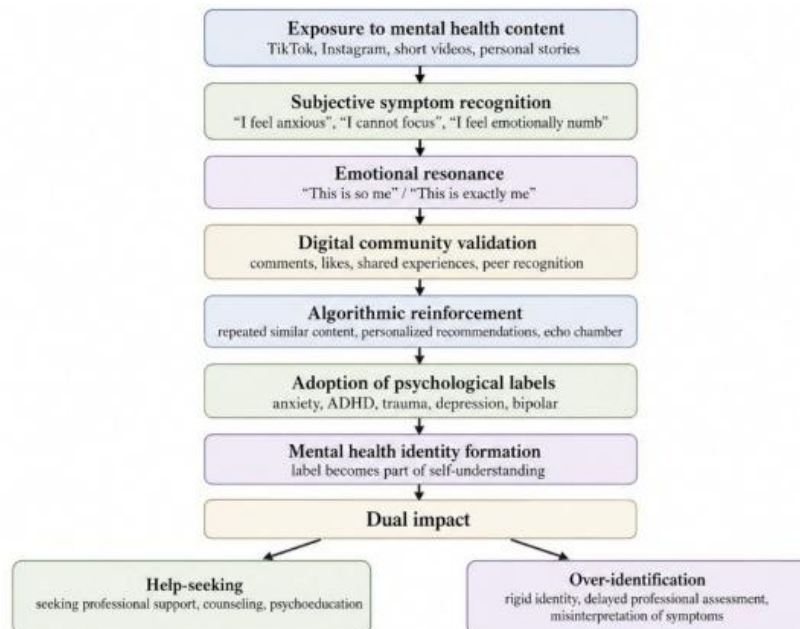


Figure 2. Awareness-to-Self-Diagnosis Pathway

4. Discussion

The Invisible Shift from Education to Identity Formation

The findings of this review show that social media initially functions as an accessible space for mental health education, but its influence may extend beyond merely increasing knowledge. Young people do not only receive information about anxiety, depression, trauma, ADHD, or burnout; they also begin to use these terms to explain

their life experiences. In this context, digital mental health literacy can serve as an important entry point, particularly when formal information is difficult to access or feels overly rigid. Dewi and Saputra, Putri et al., and Sitingjak et al. show that digital literacy is related to young people's understanding of mental health and self-diagnosis. However, when this literacy is shaped by short and emotionally charged content, the understanding that emerges is often not yet sufficiently comprehensive.

The shift from education to identity is important because young people are in a developmental phase in which questions about "who I am" are still being formed. Mental health content may help them name experiences that were previously vague, but it may also turn clinical labels into part of how they perceive themselves. Leveille shows that TikTok can become a space for neurodivergent identity performance, while Foster and Ellis highlight the emergence of TikTok-inspired self-diagnosis in educational psychology practice. The findings of also indicate that self-diagnosis among adolescents in the digital era is related to how young people understand psychological distress. Thus, mental health on social media is not only an issue of information, but also an issue of identity formation.

Algorithms as a Non-Neutral "Mirror"

Social media algorithms need to be understood as an important part of this phenomenon because digital platforms do not simply display content at random. When users pay attention to particular content, recommendation systems may continue to present similar content to keep users engaged for longer periods. Odgers et al. emphasize that the impact of digital media on adolescents should be understood in relation to usage context, individual development, and platform design. Valkenburg et al. also show that the influence of social media on adolescent mental health is not uniform, but is shaped by individual differences and digital situations. In the context of TikTok, Yeung et al. found that much ADHD-related content has limited informational quality. This suggests that repeated exposure to content does not necessarily indicate clinical accuracy.

The problem is that algorithms do not ask whether a label is psychologically accurate or consistent with professional assessment. Algorithms only read whether certain content attracts attention, triggers interaction, and keeps users watching (18). If a young person suspects that they have ADHD, anxiety, or trauma and then continues to receive similar content, they may feel that this suspicion is increasingly valid. What occurs, however, may not be clinical validation, but algorithmic validation. Studies by Frost and Rickwood, Nesi and Prinstein, Primack et al., and Tandoc et al. show that digital social experiences are related to social comparison, feedback, isolation, and emotional states. In this context, algorithms may become a mirror that reflects users' anxiety and then magnifies that reflection until it feels like the truth about the self.

Self-Diagnosis as a Process of Meaning-Making

The phenomenon of self-diagnosis cannot be adequately understood as young people's carelessness in interpreting TikTok content. Such a position is too simplistic and, in fact, overlooks the reality that many young people genuinely experience psychological distress but do not yet have a safe space to discuss it. Behind a label that may be inaccurate, there is often a human need to be understood, to be given language, and to be reassured that one's pain is real. Dewi and Saputra and Putri et al. show that mental health literacy and self-diagnosis are related to how university students or Generation Z seek to understand themselves. Febriana and Amalia also show that psychological content on TikTok may influence the tendency toward self-diagnosis. Therefore, criticism of this phenomenon still needs to be articulated without dismissing young people's experiences.

Self-diagnosis can also be understood as an effort to construct meaning from experiences that feel chaotic (19). When someone has difficulty focusing, feels restless, experiences prolonged sadness, or feels numb, psychological labels may provide structure to those experiences. Foster and Ellis emphasize that TikTok-inspired self-diagnosis has become a real issue in educational psychology practice and therefore cannot be regarded as merely a superficial trend. Galih Gayatri et al. also show that self-diagnosis among digital adolescents is related to the process of adapting to stress. However, studies on social media and adolescent mental health show associations with anxiety, depression, poor sleep quality, and psychological distress. This means that the suffering experienced may be real, but its clinical naming still requires caution.

The Risk of Over-Pathologizing Ordinary Human Experiences as Disorders

One of the main risks of social media-based self-diagnosis is over-pathologizing, namely the tendency to interpret ordinary human experiences as mental disorders (20). Feeling sad after failure, anxious before an exam, exhausted due to lack of sleep, or losing motivation after academic pressure does not always indicate a clinical disorder. However, short-form content using formats such as “signs you have...” can blur the boundary between normal experiences and clinical symptoms. Huang and Shannon et al. show that problematic social media use is associated with poorer mental health indicators. Jasso-Medrano and López-Rosales also found a relationship between social media use, addictive behavior, depression, and suicidal ideation among university students. These findings are important, but they should not be used to conclude that all distress automatically indicates a particular diagnosis.

Not all suffering is a mental disorder, but all suffering still deserves to be heard. This statement is important because discussions of self-diagnosis often fall into two extremes: either overvalidating every label derived from social media or dismissing young people’s experiences altogether. Both positions are problematic. If every life difficulty is immediately medicalized, individuals may come to see themselves as damaged, fixed, or lacking room for change. However, if every complaint is treated as drama, young people will increasingly seek validation from digital platforms. Valkenburg et al. and Odgers et al. remind us that the impact of social media needs to be understood contextually, rather than in black-and-white terms. Frost and Rickwood also show that the mental health outcomes of social media use may differ depending on users’ patterns of use and social experiences.

The Dual Role of Psychological Labels: Helping and Limiting

Psychological labels are not always harmful. In certain situations, labels can help individuals understand themselves, reduce guilt, and open a path toward help-seeking (21). Young people who previously saw themselves as “strange,” “lazy,” or “too sensitive” may begin to understand that their experiences could be related to psychological conditions that deserve attention. Leveille shows that TikTok can become a space in which neurodivergent identities are recognized and displayed. Yeung et al. also show that ADHD content on TikTok attracts substantial attention, although the quality of its information requires critique. In this context, labels can become an initial language for self-reflection. Problems arise when such labels are accepted as clinical certainty without assessment and are then used to explain a person’s entire behavior and future.

Labels become risky when they shift from tools for self-understanding into boundaries that confine the self. The statement “I am experiencing anxiety” still leaves room for change, help, and recovery. By contrast, the statement “I am just an anxious person” may make identity feel fixed and difficult to shift. The same applies to ADHD, trauma, or bipolar when these labels are used without professional evaluation. Foster and Ellis emphasize that TikTok-based self-diagnosis may create challenges for educational psychology practice, especially when labels influence how students understand their abilities and difficulties. Galih Gayatri et al. also show that self-diagnosis among digital adolescents is related to how they organize experiences of stress. Therefore, mental health labels should serve as a gateway to understanding and support, not as an identity prison.

Implications for Digital Mental Health Literacy

The main implication of this review is the need for sharper digital mental health literacy. Young people need to be taught to distinguish educational content, personal experience, initial screening, self-reflection, and professional diagnosis (22). TikTok or Instagram content may serve as a starting point for realizing that something deserves attention, but it should not become the endpoint for determining a diagnosis. Sitinjak et al. show that education through TikTok can increase adolescents’ mental health knowledge, while Dewi and Saputra and Putri et al. position digital health literacy as an important issue in self-diagnosis behavior. Therefore, the healthier question after watching mental health content is not “which diagnosis fits me best?” but rather “what am I experiencing, how much is it interfering with my life, and what kind of help do I need?”

Implications for Families, Schools, Universities, Health Professionals, and Digital Platforms

For families, the response to young people who say “I think I have ADHD” or “I have anxiety” should not be immediate ridicule or rejection. Such responses only push young people to seek even more validation from social media. Families can begin by asking what the young person is feeling, when it started, and whether the condition is interfering with sleep, school, relationships, or daily activities. For schools and universities, guidance and counseling teachers, counselors, academic advisors, and psychological services need to understand the

popular mental health language used by young people. Foster and Ellis emphasize that the phenomenon of TikTok self-diagnosis already has implications for educational psychology practice. Nesi and Prinstein and Primack et al. also show that digital social experiences are related to feedback, social comparison, and isolation, all of which are relevant to students' lives.

For health professionals, self-diagnosis does not need to be treated as an enemy (23). Young people who come with labels from TikTok still need to be heard because those labels may serve as an entry point for a more accurate assessment. Health professionals can help distinguish among symptoms, emotional experiences, situational stress, and clinical disorders. For digital platforms, mental health content needs to be accompanied by clearer context, such as reminders that the content is not a diagnosis, links to credible sources, promotion of professional help, and restrictions on content that oversimplifies mental disorders. The content quality of mental health information on TikTok also needs attention because diagnostic language may appear persuasive even when it is not clinically adequate (24). Keles et al. Huang, Shannon et al., and Jasso-Medrano and López-Rosales show that social media use is related to various psychological risks. Therefore, responsibility does not rest solely on users, but also on the digital ecosystem that shapes how users understand themselves.

Strengths, Limitations, and Further Recommendations

The strength of this article lies in its effort to examine self-diagnosis not merely as a problem of misinformation, but as a process of mental health identity formation among young people. This article also offers the awareness-to-self-diagnosis pathway framework, which connects content exposure, symptom recognition, emotional resonance, community validation, algorithmic reinforcement, label adoption, and identity formation. In addition, the discussion highlights not only the risks of social media, but also its benefits as a space for literacy and validation. However, this article has limitations because most of the sources used are still dominated by studies from Western contexts, while sources from Indonesia remain limited and do not yet fully represent the experiences of young people in Indonesia. Moreover, this article is not a meta-analysis or a direct field study. These findings also do not yet capture differences in experience based on culture, age, gender, social class, and access to mental health services. Future research needs to empirically examine this framework among adolescents, university students, and active TikTok users (25).

5. Conclusion

Social media has become an important space for young people to recognize, discuss, and make meaning of their mental health experiences. TikTok and similar short-form video platforms can increase awareness, provide emotional validation, reduce stigma, and open conversations about psychological help. However, the same strengths also carry risks when brief, emotional, and repeated content is considered sufficient to explain a person's clinical condition. The findings of this review show that social media not only disseminates mental health information, but also influences how young people recognize symptoms, interpret suffering, seek validation, and use psychological labels. Thus, self-diagnosis on social media needs to be understood as a phenomenon situated between literacy, validation, the risk of misinformation, and the formation of self-identity.

This study emphasizes that self-diagnosis on social media cannot be understood merely as a problem of misinformation. This phenomenon is related to meaning-making, the need to be understood, the influence of digital communities, algorithmic personalization, and the transformation of clinical language into the language of identity. Through the awareness-to-self-diagnosis pathway framework, this article shows that content exposure may move from education toward the adoption of psychological labels as part of self-understanding. Therefore, youth mental health promotion needs to be directed toward critical digital mental health literacy, including the ability to distinguish self-reflection, initial screening, personal experience, and professional diagnosis. Future research is recommended to empirically test this conceptual framework among adolescents, university students, and active TikTok users while considering culture, gender, social class, and access to mental health services.

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